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**\*\* CONTINUING DATA \*\*\*\*\***

This application is a 371 of PCT/EP2005/000484 01/19/2005

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

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**\*\* IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\***

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Foreign Priority claimed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Met after Allowance	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119(a-d) conditions met	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		FINLAND	6	27	4
Verified and Acknowledged	/MICHAELA VAN LENTE/ Examiner's Signature	Initials				

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**TITLE**

Sampling and Assay Device

<b>FILING FEE RECEIVED</b> 1580	FEES: Authority has been given in Paper No._____ to charge/credit DEPOSIT ACCOUNT No._____ for following:	<input type="checkbox"/> All Fees
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